

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2000

Application or Docket Number

09967240

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

|                                  |              |                          |
|----------------------------------|--------------|--------------------------|
| TOTAL CLAIMS                     | 37           |                          |
| FOR                              | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 37 minus 20= | * 17                     |
| INDEPENDENT CLAIMS               | 5 minus 3 =  | * 2                      |
| MULTIPLE DEPENDENT CLAIM PRESENT |              | <input type="checkbox"/> |

SMALL ENTITY  
TYPE

OTHER THAN  
OR SMALL ENTITY

|           |        |
|-----------|--------|
| RATE      | FEE    |
| BASIC FEE | 355.00 |
| X\$ 9=    |        |
| X40=      |        |
| +135=     |        |
| TOTAL     |        |

|           |        |
|-----------|--------|
| RATE      | FEE    |
| BASIC FEE | 710.00 |
| X\$18=    | 366    |
| X80=      | 160    |
| +270=     |        |
| TOTAL     | 1176   |

OTHER THAN  
OR SMALL ENTITY

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |         | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|---------|---|------------------|
|  | Total                                     | * Minus | **  | =                |
| Independent                                    | * Minus                                   | ***     | =   |                  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |         | <input type="checkbox"/>                    |                  |

SMALL ENTITY

OR

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=              |                        |
| X40=                |                        |
| +135=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$18=              |                        |
| X80=                |                        |
| +270=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |         | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|---------|---|------------------|
|  | Total                                     | * Minus | **  | =                |
| Independent                                    | * Minus                                   | ***     | =   |                  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |         | <input type="checkbox"/>                    |                  |

RATE

ADDITIONAL  
FEE

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=              |                        |
| X40=                |                        |
| +135=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

|                     |                   |
|---------------------|-------------------|
| RATE                | ADDITIONAL<br>FEE |
| X\$18=              |                   |
| X80=                |                   |
| +270=               |                   |
| TOTAL<br>ADDIT. FEE |                   |

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |         | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|---------|---|------------------|
|  | Total                                     | * Minus | **  | =                |
| Independent                                    | * Minus                                   | ***     | =   |                  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |         | <input type="checkbox"/>                    |                  |

RATE

ADDITIONAL  
FEE

|                     |                        |
|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=              |                        |
| X40=                |                        |
| +135=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

|                     |                   |
|---------------------|-------------------|
| RATE                | ADDITIONAL<br>FEE |
| X\$18=              |                   |
| X80=                |                   |
| +270=               |                   |
| TOTAL<br>ADDIT. FEE |                   |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.